



The Commonwealth of Massachusetts
Division of Professional Licensure
239 Causeway Street, Boston, MA 02114
Board of Architects
www.mass.gov/reg
617-727-3072

Policy of Reinstatement for Lapsed Architectural License
There is no inactive status in Massachusetts

1. For those licenses expired within the last three years (3):
 - Pay all licensing fees for the lapsed years, plus a late fee (Board will notify you of the appropriate fee)
2. For those licenses expired more than three (3) years ago but less than ten years (10):
 - Submit to the Board a reinstatement application.
 - Submit to the Board graphic evidence of three (3) current projects whose scope is appropriate to the scope of the project for which the registrant desires to be licensed.
 - Submit to the Board three (3) reference letters from each of the clients whose projects are being presented.
 - Provide the Board a brief written history of your practice since your license lapsed.
 - Pay all licensing fees for lapsed years, plus a late fee (Board will notify you of the appropriate fee).
 - You may be required to appear for a personal interview before the Registration Board.
 - Or in lieu of submitting three (3) current projects and three(3) corresponding reference letters you can file a reciprocity application (Blue Book) through NCARB, telephone #202-783-6500. (you must be certified by NCARB and hold a current license in another jurisdiction to be considered eligible for reciprocity)
3. For those licenses expired for more than ten years (10):
 - You may be required to take the current A.R.E. examination (computer examination).
 - Submit to the Board a reinstatement application.
 - Submit to the Board graphic evidence of three (3) current projects whose scope is appropriate to the scope of the project for which the registrant desires to be licensed.
 - Submit to the Board three (3) reference letters from each of the clients whose projects are being presented.
 - Provide the Board a brief written history of your practice since your license lapsed.
 - Pay all licensing fees for lapsed years, plus a late fee (Board will notify you of the appropriate fee).
 - You may be required to appear for a personal interview before the Registration Board.
 - Or in lieu of submitting three (3) current projects and three(3) corresponding reference letters you can file a reciprocity application (Blue Book) through NCARB, telephone #202-783-6500. (you must be certified by NCARB and hold a current license in another jurisdiction to be considered eligible for reciprocity)



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Architectural Reinstatement Fee--\$113.00

BOARD USE ONLY

Board: _____
License #: _____
Type: _____
Cash #: _____
Cash Date: _____

Please attach recent

2" X 2"

passport photograph here

1. Applicant Name: _____
Last First Middle
2. Maiden Name: _____
3. Current License#: _____ License Expiration Date: _____

BOARD USE ONLY

Status Code: _____ Issue Date: _____ Lic. Exp. Date: _____

4. Date of Birth: _____ Place of Birth: _____
5. Permanent Address: _____
No. Street Apt. #

City/Town State Zip Code
6. Business Address (If Applicable): _____
No. Street Apt. #

City/Town State Zip Code
7. Telephone Number-Day: _____ Evening: _____
8. Social Security Number (**Mandatory**): _____
Pursuant to G.L. c. 62C, s. 47A, the Division of Professional Licensure is required to obtain your social security number and forward it to the Department of Revenue. The Department of Revenue will use your social security number to ascertain whether you are in compliance with the tax laws of the Commonwealth.
9. List any licenses/certifications you hold in the United States or any country or foreign jurisdiction and the state/jurisdiction from which the license/certification was originally

issued. Please attach a certificate of standing from each state or jurisdiction in which you are licensed/certified, indicating the status of your license and any relevant disciplinary information. _____

10. Has any disciplinary action been taken against you by a licensing/certification board located in the United States or any country or foreign jurisdiction? Yes: ☐ No: ☐

If yes, please state the details (use a separate sheet if necessary):

11. Are you the subject of pending disciplinary actions by a licensing/certification board located in the United States or any country or foreign jurisdiction? Yes: ☐ No: ☐

If yes, please state the details (use a separate sheet if necessary):

12. Have you ever voluntarily surrendered or resigned a professional license to a licensing/certification board in the United States or any country or foreign jurisdiction? Yes: ☐ No: ☐ If yes, please state the details (use a separate sheet if necessary):

13. Have you ever applied for and been denied a professional license in the United States or any country or foreign jurisdiction? Yes: ☐ No: ☐

If yes, please state the details (use a separate sheet if necessary): _____

14. Have you ever been convicted of a felony or misdemeanor in the United States or any country or foreign jurisdiction, other than a traffic violation for which a fine of less than \$100.00 was assessed? Yes: ☐ No: ☐

If yes, please state the details (use a separate sheet if necessary):

15. Under what name or firm name are you practicing or do you expect to practice Architecture in Massachusetts? _____

16. Position with Firm: _____

17. Number of years with firm: _____

18. Date Massachusetts Registration lapsed: _____

19. Reason for lapsed Massachusetts Registration: _____

20. Provide a brief history of your practice since your Massachusetts Registration lapsed:

21. Method of original Massachusetts Registration (examination/reciprocity): _____

22. Base State Registration: _____

23. Base State information:

License#: _____ Date issued: _____

Expiration date: _____

24. You must provide graphic evidence of at least three projects for which you have been either the architects of record or had substantial responsibility (if not the architect of record, a detailed description of responsibility). Photographs and brochures may be acceptable for evidence.

25. You must provide reference letters from the clients of each of the three projects that you are submitting.

26. I certify, under the pains and penalties of perjury, that the information I have provided pursuant to this application for licensure is truthful and accurate. I understand that the failure to provide accurate information may be grounds for the Massachusetts Board of Registration in Architects to deny me the right to sit as a candidate or to suspend or revoke a license issued to me in accordance with Massachusetts Law. I further attest that, pursuant to G.L. c. 62C, s. 49A., to the best of my knowledge and belief, I have filed all state tax returns and paid all state taxes required by law.

Signature of applicant

Date